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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/422,983 11/01/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

DENMARK PA 2002 01686 11/01/2002

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 02/27/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY DENMARK	SHEETS DRAWING 47	TOTAL CLAIMS 75	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

7278

**TITLE**

PROTEIN VARIANTS OF NATURALLY OCCURRING ALLERGENS

<b>FILING FEE RECEIVED</b> 3864	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:  <i>MF 848</i>	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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